

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>7-7-14</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>JOE C. GALLOWAY</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>8-7-14</u>	
4.a. CAMPAIGN ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div> <u>3314 OAK BURN DRIVE CHATTANOOGA TN 37414 (423) 821-4945</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div>			
5. OFFICE SOUGHT (include district number, if applicable) <u>SCHOOL BOARD - DISTRICT 6</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>JOE GALLOWAY</u>	
7. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FIRST QUARTER <input checked="" type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER </div> <div> <input type="checkbox"/> PRE-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL </div> </div>			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>4-1-14</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>6-30-14</u>	
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <div style="display: flex; justify-content: space-between;"> <div> <u>Joe C. Galloway</u> signature of candidate </div> <div> <u>7-7-14</u> date </div> <div> <u>Joe C. Galloway</u> signature of political treasurer </div> <div> <u>7-7-14</u> date </div> </div>			
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between;"> <div> <u>Cheryl M. Galloway</u> signature of witness </div> <div> <u>7-7-14</u> date </div> <div> <u>Cheryl M. Galloway</u> signature of witness </div> <div> <u>7-7-14</u> date </div> </div>			
12. SUMMARY a. BALANCE ON HAND LAST REPORT \$ <u>0</u> b. TOTAL RECEIPTS THIS PERIOD \$ <u>1,260.00</u> c. TOTAL DISBURSEMENTS THIS PERIOD \$ <u>87.40</u> d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ <u>1172.60</u> e. TOTAL LOANS OUTSTANDING \$ <u>0</u> f. TOTAL OBLIGATIONS OUTSTANDING \$ <u>0</u>			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>JOE C. GALLOWAY</u>	14. REPORT COVERING THE PERIOD FROM: <u>4-1-14</u> TO: <u>6-30-14</u>
--	--

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 485.00

b. Itemized Contributions (over \$100 from each source this period) \$ 775.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 1,260.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 1,260.00

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>PRINTING</u>	\$	<u>87.40</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) \$ 87.40

b. Itemized Expenditures (Over \$100 each payee this period) \$ 0

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 87.40

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 87.40

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ _____

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ _____

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JOE C. GALLOWAY				2. REPORT COVERING THE PERIOD FROM: 4-1-14 TO: 6-30-14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$1,260.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name RICHARD		Middle Name		Contribution Received For:		Amount of Contribution \$250.00
Last Name/Organization Name FLOYD				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address 306 ALTONA DRIVE				Date of Contribution 6-10-14		Aggregate This Election
City CHATTANOOGA	State TN	Zip Code 37415				
Occupation RETIRED						
Employer						
First Name JERRY		Middle Name		Contribution Received For:		Amount of Contribution \$250.00
Last Name/Organization Name WALLS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address 3301 MOUNTAIN VIEW DRIVE				Date of Contribution 6-19-14		Aggregate This Election
City CHATTANOOGA	State TN	Zip Code 37419				
Occupation RETIRED						
Employer						
First Name BYRON		Middle Name		Contribution Received For:		Amount of Contribution \$125.00
Last Name/Organization Name HUGHES				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address 3354 OAK BUCK DRIVE				Date of Contribution 6-19-14		Aggregate This Election
City CHATTANOOGA	State TN	Zip Code 37419				
Occupation RETIRED						
Employer						
First Name CARL		Middle Name		Contribution Received For:		Amount of Contribution \$150.00
Last Name/Organization Name ELLIS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address 1325 OAK BUCK DRIVE				Date of Contribution 6-19-14		Aggregate This Election
City CHATTANOOGA	State TN	Zip Code 37419				
Occupation RETIRED						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					\$775.00	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD		
			FROM: 4-1-14	TO: 6-30-14	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		BUSINESS CARDS		\$87.40	
Address					
City	State				Zip Code
2919 W. CUMMINGS HWY CHATTANOOGA TN 37419					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State				Zip Code
5. TOTAL ITEMIZED EXPENDITURES					
(Carry forward to item 3. of next page if additional pages of this form are used.)				\$87.40	
(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					

